Application

OFFICE OF BECRETARY OF STATE DEPARTMENT OF ARCHIVES & BISTORY

GEORG	ALCORDS DISPOSITION STANDARD	RECORDS MANAGEMENT DIVISION		
] Application Date	INSTRUCTIONS: See separate instructions for completion of	FOR RECORDS MANAGEMENT DIVISION USE		
🖫 June 4, 1974	front and reverse of this form. Sign original and two copies	Date Received Application No. Date Completed		
2 Agency Application No DHR DPH 29	and forward to Department of Archivee and History, Attention: Records Management Officer.	111N - 7 1974 74-191 JUL - 3 1974		
3 Department of Huma	Administering Office Address N Resources	Person to Contant		
	al Health - Health Improvement Section	Jewell Callahan		
	S. W Atlanta, Georgia 30334	5. Norking Title 6. fel. In # \$3.0 Admin. Officer 656-4727		
7.ACTION REQUESTE	D company of the comp		-	
FSTARLISH D	TSPOSITION STANDARD. 📻 DISP	OSE OF PRESENT ACCUMULATION:	i	

RECORD WILL CONTINUE TO ACCUMULATE.

8.Earliest & Latest Dates of Series 1973 - to date

9 Exact Series Title PAYMENT STERILIZATION AUTHORIZATION FILES

0. What is the function of the office in which this record series is created? The Division of Physical Health is responsible for the administration, direction and coordination of the Physical Health Programs in the State. These include, but are not limited to, health standards for businesses, housing, field operations and hospitals throughout the State; improvement of physical and dental health of adults and children, and health of expectant mothers; administration of family planning and sterilization programs; diagnosis and control of diseases; supervision of construction and licensure of health facilities; and administration of the Cancer Assistance Program.

The Maternal Health/Family Planning Unit has the function to improve the quality of family life by promoting all maternal health activities on local and district Human Resources staffs to women in child bearing years. Also to establish service standards, policies, and procedures; and coordinate activities of all involved agencies.

1. This file contains the following documents (include form numbers and titles, if any, and file arrangement).

Documents relating to the authorization and payment for the surgical sterilization of residents (male and female) of the State of Georgia.

Included are Form HC 2.50 (application for payment for sterilization by which individual requests sterilization at State expense); Form HC 2.51 (authorization for payment to physician); Form HC 2.52 (authorization for payment to hospital); and itemized statement of charges.

Files are arranged alphabetically by name of the individual.

ATTACH SAMPLES OF THE FILE

12.	EQUIPMENT OCCUPIED	No. of Drawers	Cu. Ft. of Records	to be determined as	No. of Drawers	Cu. Pt. of Record
	Letter-size File Drawars	3 4 2 1 1 1 1	1.5	ANNUAL MATE OF ACCUMULATION Program develops		
	3. Logal-size File Dravers ,			Floor Space Occupied (Square Feet)	. In Office(e)	In Storage Area(a
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	55.3		Manage 4.1	AVERAGE DAILY REFERENCES	2 0	0 0

	PAGE 2				
QUESTIONNAIRE Place an "x" in the proper column. If answer is "YES," please explain	YES & NO				
13. Is this the Record Copy of the series?	[x] [-,]				
14. Is there a duplication of this series in another office or agency?	[£] + [x]				
15. Is the information contained in this series ever summarized or published? Attach copy of summary or publication. 16. Does the series contain classified information requiring security handling?					
17. Does the series initiate, amend or terminate agency policies and procedures?	ા 1 ા ક ા 				
18. Could the function be performed if the files were lost or destroyed?	[*] [*]				
19. Is the series (or major portion of it) regularly microfilmed? If yes, why?	[] `[x ·]				
20. Does the record series provide data as input to an EDP file?	[] [x]				
21. Does the record series contain documentation produced as EDP printout? उत्तर का	[~] [x]				
22. Has the Federal Government issued instructions governing the retention/disposition of these files? The same and the same and address in the same and the same					
24. REQUIREMENTS: The following requires the files to be kept rough to years:	odesesia Tosaloran				
Transmin and the modern sound of the states	runnunoum <u>Dupi</u> lio				
a.[]STATE b.[]STATUTE OF C.[]AUDIT C.[]FEDERAL *e.k]ADMINISTRATIVE f.[]HISTORICAL LAW LIMITATION PERIOD LAW DECISION VALUE (Cite Lad, Statute, of other reason for the retention requirement) *see attached memorandum echypes dail the of oala .are; gained linds and o of oala .asiones is local links seitivide stationed a memorandum.					
25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at					
of each -[]CALENDAR YEAR -[k]FISCAL YEAR -[]OTHER	,then:				
[x] Hold in the current files area month(s)/1 year(s): [x] Transfer to [x] State Records Center [] Local Holding Area; hold 6 : year(s): [x] Destroy. [x] Destroy. [] Transfer to State Archives for permanent retention. [] Destroy immediately after cut-off. Therefore a contraction of successful and the cut-off of the cut-off. Therefore a contraction of successful and the cut-off of the					
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(Indicate briefly rationale for recommendations above/or write additional remark	(s):				
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Records Management Officer (Signature) Date OTHER REQUIRED SIGNATURES OTHER REQUIRED SIGNATURES	DATE				
26. RECOMMENDATIONS AGENCY MEDICAL DESCUMENT	6 km 74				
in paragraph 25 Approved [] Disapproved Coulumber () are: State Auditor/Designee					
STATE RECORDS Secretary of State/Designee	1-1-14				
COMMITTEE D [1] Approved [] Disapproved Carlo Superior Superior Committee C	6-28-14				
[V] Approved [] Disapproved /9 M IV Duck	7.2.74				

7.2.74